

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DNC Services Corp./Dem. Nat'l Committee

**A.**

Full Name (Last, First, Middle Initial)

Carolyn B Preston

Mailing Address 6454 Pony Express Trl, #33-437

City

Pollock Pines

State

CA

Zip Code

95726-9652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: C22199533

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Patricia C Preston

Mailing Address 346 Southbury Rd

City

Roxbury

State

CT

Zip Code

06783-2102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Stamford Health Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: C22122663

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Preston

Mailing Address 22760 Stonemeadow Rd

City

Rapid City

State

SD

Zip Code

57702-7700

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: C22086069

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....